PATENT APPLICATION FEE DETERMINATION RECORD Application of Docker Number 1076707													ĺ
Effective October 1, 2003 / 15 7 6 7 20 1													
CLAIMS AS FILED - PART I SMALL E (Cotumn 1) (Cotumn 2) TYPE										OF	OTHER SMALL		
TC	TAL CLAIMS		17				!	RATE	FEE]	RATE	FEE ·	ľ
FOR .			NUMBER FILED		NUMBER EXTRA			BASIC FE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			17 minus 20=					XS 9=		OR	X\$18=		
IND	EPENDENT CL	AIMS ·	3 minus 3 =		·			X43*		OR	X86≈	ſ	
MŲ	LTIPLE DEPEN	DENT CLAIM P	RESENT					+145°	·	OR	+290=	ļ	
* If the difference in column 1 is less than zero, enter "O" in column 2										ОЯ	TOTAL	770	
1.200) CLAIMS AS AMENDED - PART II								SMALL	ENTITY	OR	OTHER		
	2004	(Column 1)		(Colur		(Column 3)	1	3112766	ADDI-) 1		ADDI	
¥.	·	REMAINING AFTER		PREVIO		PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL	
Š		AMENDMENT		PAID	FOR	-			FRE	1		FEE	
AMENDMENT	Total	• [7	Minus	- 0	0			X\$ 9≖		OR	X\$18=	<i>-</i>	
AME	Independent	· 3	Minus	~ ·		· —		X43= .		OR	X86=		l
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+290=	-	İ
	•	. •	TOTAL		OR	YOYAL ADDIT, FEE		l					
(Column 1) (Column 2) (Column 3)													
		CLAIMS REMAINING		. HIĞH NUM		PRESENT	1 1		ADDI-	1		ADDI-	l
		AFTER		PREVIO	DUSLY	EXTRA		RATE	TIONAL	•	RATE	TIONAL FEE	
I I	Total	AMENDMENT	Minus	7	()	. 1	1	X\$ 9≈		OR		744	h
AMENDMENT	Insependent	24	Minus	-X	Υ_	. /	1	X43=	 		X86=		ľ
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ 	OR	7000		
						, .		+145=	X	OR	+290=	75 3/-6	L
	1bath							TOTAL ADDIT. FEE		OR	ADDIT. FEE	1938	ľ
	124104	<u> </u>	<u>l</u>	. \			ŀ						
O	14 ,	CLAIMS REMAINING		HIGH NUM	BER	PREGENT		Soft.	ADDI- TIONAL	\	RATE	ADDI-	
NTC		AFTER AMENDMENT		PREVIO		DULGO		RATE	FEE		TALLE	FEE	ı
AMENDME	Total	.28	Minus	77	7	• .		X\$ 9°		OR	X\$18=		
EN S	Independent	.2	Minus	1	ろ・	• •	ľ	X43=	\.	OR	X86=		
٩	FIRST PRESE	NTATION OF MI	JUTIPLE DEF	ENDEN	CLAIM		I/I		\	<u>~</u>			
							ĺ	+145=		OR	+290+	<u> </u>	ł
"If the entry in column 1 is less than the entry in column 2, write "o" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2." "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "2."													Į.
-	T the "Highest Nu The "Highest Nur	mber Previously Pa der Previously Pai	ang For DN THE Id For (Rosa) of	nuqsbenq 2 2 mm/cg	# 1965 013 #01) (\$ 016	yighest unus	er to.	IA GATI ATÍ DAN.	blobusie po	z in cc	buma 1.	/	

FORM PTO-673 (Rev 1003)

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